

## PART B - FEE(S) TRANSMITTAL

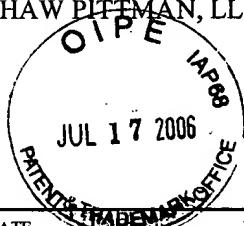
Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE**  
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00909 7590 04/20/2006

PILLSBURY WINTHROP SHAW PITTMAN, LLP  
P.O. BOX 10500  
MCLEAN, VA 22102



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### Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/583,736	05/31/2000	Avner Shafir	52817.000112	2786

TITLE OF INVENTION: COMMUNICATION LINK SYSTEM BASED ON USER INDICATOR

042846-0312789

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	07/20/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS		
HAILU, TADESSE	2173		715-751000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
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(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 PILLSBURY WINTHROP SHAW  
2 PITTMAN, LLP  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

International Business Machines  
Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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 Publication Fee (No small entity discount permitted)  
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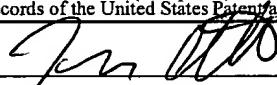
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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-3975 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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07/18/2006 MBYENEE 00000074 033975 09583736

Authorized Signature 

Date 01/01/2006 1400.00 DA

Typed or printed name James G. Gatto

Registration No. 32,694

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